



SOCIAL MEDIA APPLICATION

Name: _____

Title: _____

Phone: _____ E-mail: _____

ADMINISTRATOR INFORMATION

Name: _____

Type of Account: Facebook Twitter Instagram Other: _____

Facebook Account:

List the name and e-mail of two Jefferson College employees that will serve as administrators of the account(s):

Employee #1 _____

E-mail Associated with **Facebook** Account _____

Employee #2 _____

E-mail Associated with **Facebook** Account _____

Twitter Account:

Username Request #1 _____ Username Request #2 _____

Username Request #3 _____

E-mail _____

Instagram Account:

Username Request #1 _____ Username Request #2 _____

Username Request #3 _____

E-mail _____

Other Account:

Type _____ Username (if required): _____

E-mail _____

(For Approval Use Only)	
Account Created For: _____	
Username: _____	Password: _____
E-mail: _____	Security Question: _____

SOCIAL MEDIA ACCOUNT INFORMATION POLICY AGREEMENT

___ I have read the Jefferson College Social Media Policy Guidelines and acknowledge the terms and conditions.

_____	_____	_____	_____
Signature of Applicant	Immediate Supervisor	College Dean	Date

The completion of this application does not ensure immediate approval in becoming an authorized Jefferson College social media account. To be authorized as an official Jefferson College social media account, groups must receive approval from the Webmaster-Digital Marketing Coordinator or Director of Public Relations and Marketing.

Please forward completed form to Erin Bova, Webmaster – Digital Marketing Coordinator.